S&H Form: (12/04)

REPLY/AMENDMENT FEE TRANSMITTAL

Attorney Docket No.	826.1775
Application Number	09/998,225
Filing Date	December 3, 2001
First Named Inventor	Fumirou ABE, et al.
Group Art Unit	2171

AMOUNT ENCLOSED	0.00	Examiner Name	Kuen Lu

FEE CALCULATION (fees effective 12/08/04)

CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations
TOTAL CLAIMS	24	- 24 =	0	X $ 50.00 =	$ 0.00
INDEPENDENT CLAIMS	8	- 8 =	0	X $ 200.00 =	0.00

Since an Official Action set an <u>original</u> due date of <u>February 9, 2005</u>, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month ($120)); (2 months ($450)); (3 months ($1,020)); (4 months ($1,590)); (5 months ($2,160):	
If Notice of Appeal is enclosed, add ($500.00)	
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee ($130.00)	
Information Disclosure Statement (Rule 1.17(p)) ($180.00)	
Total of above Calculations =	$ 0.00
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)	
TOTAL FEES DUE =	$ 0.00

(1) If entry (1) is less than entry (2), entry (3) is "0".

(2) If entry (2) is less than 20, change entry (2) to "20".

(4) If entry (4) is less than entry (5), entry (6) is "0".

(5) If entry (5) is less than 3, change entry (5) to "3".

METHOD OF PAYMENT

☐ Check enclosed as payment.

☐ Charge "TOTAL FEES DUE" to the Deposit Account No. below.

☒ No payment is enclosed and no charges to the Deposit Account are authorized at this time (unless specifically required to obtain a filing date).

GENERAL AUTHORIZATION

☒ If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:

Deposit Account No.	19-3935
Deposit Account Name	STAAS & HALSEY LLP

☒ The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.

SUBMITTED BY: STAAS & HALSEY LLP

Typed Name	John C. Garvey		Reg. No.	28,607
Signature			Date	2-9-05

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03/22/2005 KDOWNING 00000003 193935 09998225

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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001	Application or Docket Number 09998225

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	22	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	22 minus 20 =	* 2
INDEPENDENT CLAIMS	6 minus 3 =	* 3
MULTIPLE DEPENDENT CLAIM PRESENT	☐	

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 24	Minus	** 22	= 2
Independent	* 8	Minus	*** 6	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=	—	OR	X$18=	36
X42=		OR	X84=	172
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	208

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 24	Minus	** 24	=
Independent	* 9	Minus	*** 8	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	200
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	200

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
   The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.